Company Tracking Number: AIC-08-TRIGGER-01

TOI: 35.0 Interline Filings Sub-TOI: 35.0002 Commercial Interline Filings

Product Name: Credit Trigger Endorsement

Project Name/Number: /AIC-08-Trigger-01

Filing at a Glance

Companies: American Home Assurance Company, AlU Insurance Company, American International South Insurance Company, AlG Casualty Company, Commerce and Industry Insurance Company, Granite State Insurance Company, Illinois National Insurance Co., National Union Fire Insurance Company of Pittsburgh, Pa., New Hampshire Insurance Company, The Insurance Company of the State of Pennsylvania

Product Name: Credit Trigger Endorsement SERFF Tr Num: AGNY-125940139 State: Arkansas

TOI: 35.0 Interline Filings SERFF Status: Closed State Tr Num: EFT \$50

Sub-TOI: 35.0002 Commercial Interline Filings Co Tr Num: AIC-08-TRIGGER-01 State Status: Fees verified and

received

Filing Type: Form Co Status: Reviewer(s): Betty Montesi,

Llyweyia Rawlins

Disposition Date: 12/11/2008

Authors: Monique Myers, Angela

Caraballo, Ronald Colaninno

Date Submitted: 12/11/2008 Disposition Status: Approved

Effective Date Requested (New): On Approval

Effective Date (New): 12/11/2008

Effective Date Requested (Renewal): On Approval Effective Date (Renewal):

12/11/2008

State Filing Description:

General Information

Project Name: Status of Filing in Domicile: Pending

Project Number: AIC-08-Trigger-01 Domicile Status Comments:

Reference Organization: Reference Number:
Reference Title: Advisory Org. Circular:

Filing Status Changed: 12/11/2008

State Status Changed: 12/11/2008 Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

The above-referenced companies (the "Companies") submit the attached Credit Rating Downgrade Endorsements. The substance of these endorsements was created collaboratively with our brokers and insureds. Understandably, our brokers and clients are extremely concerned about the recent developments of the Companies' parent, American

Company Tracking Number: AIC-08-TRIGGER-01

TOI: 35.0 Interline Filings Sub-TOI: 35.0002 Commercial Interline Filings

Product Name: Credit Trigger Endorsement

Project Name/Number: /AIC-08-Trigger-01

International Group, Inc. The creation and use of these endorsements is an attempt to allay such concerns. Upon the request of the insured, the appropriate endorsement will be issued, at no charge to the insured. The endorsements will be available for use for all lines of business except workers' compensation.

We wish to make this filing effective on the earliest date permitted by your Department.

Company and Contact

Filing Contact Information

Ronald Colaninno, Director - State Filings Ronald.Colaninno@AIG.com
175 Water Street (212) 458-7462 [Phone]
New York, NY 10038 (212) 458-7077[FAX]

Filing Company Information

American Home Assurance Company CoCode: 19380 State of Domicile: New York

70 Pine Street Group Code: Company Type:
New York, NY 10270 Group Name: State ID Number:

(212) 770-7000 ext. [Phone] FEIN Number: 13-5124990

AlU Insurance Company CoCode: 19399 State of Domicile: New York

70 Pine Street Group Code: Company Type:
New York, NY 10270 Group Name: State ID Number:

(212) 770-7000 ext. [Phone] FEIN Number: 13-5303710

American International South Insurance CoCode: 40258 State of Domicile: Pennsylvania

Company

70 Pine Street Group Code: Company Type:
New York, NY 10270 Group Name: State ID Number:

(212) 770-7000 ext. [Phone] FEIN Number: 02-6008643

AIG Casualty Company CoCode: 19402 State of Domicile: Pennsylvania

70 Pine Street Group Code: Company Type:
New York, NY 10270 Group Name: State ID Number:

(212) 770-7000 ext. [Phone] FEIN Number: 25-1118791

Company Tracking Number: AIC-08-TRIGGER-01

TOI: 35.0 Interline Filings Sub-TOI: 35.0002 Commercial Interline Filings

Product Name: Credit Trigger Endorsement

Project Name/Number: /AIC-08-Trigger-01

Commerce and Industry Insurance Company CoCode: 19410 State of Domicile: New York

70 Pine Street Group Code: Company Type:
New York, NY 10270 Group Name: State ID Number:

(212) 770-7000 ext. [Phone] FEIN Number: 13-1938623

Granite State Insurance Company CoCode: 23809 State of Domicile: Pennsylvania

70 Pine Street Group Code: Company Type:
New York, NY 10270 Group Name: State ID Number:

(212) 770-7000 ext. [Phone] FEIN Number: 02-0140690

Illinois National Insurance Co. CoCode: 23817 State of Domicile: Illinois

CoCode: 19445

State of Domicile: Pennsylvania

State of Domicile: Pennsylvania

70 Pine Street Group Code: Company Type:
New York, NY 10270 Group Name: State ID Number:

(212) 770-7000 ext. [Phone] FEIN Number: 37-0344310

National Union Fire Insurance Company of

Pittsburgh, Pa.

70 Pine Street Group Code: Company Type:
New York, NY 10270 Group Name: State ID Number:

(212) 770-7000 ext. [Phone] FEIN Number: 25-0687550

New Hampshire Insurance Company CoCode: 23841 State of Domicile: Pennsylvania

CoCode: 19429

70 Pine Street Group Code: Company Type:
New York, NY 10270 Group Name: State ID Number:

(212) 770-7000 ext. [Phone] FEIN Number: 02-0172170

The Insurance Company of the State of

Pennsylvania

70 Pine Street Group Code: Company Type:
New York, NY 10270 Group Name: State ID Number:

(212) 770-7000 ext. [Phone] FEIN Number: 13-5540698

Company Tracking Number: AIC-08-TRIGGER-01

TOI: 35.0 Interline Filings Sub-TOI: 35.0002 Commercial Interline Filings

Product Name: Credit Trigger Endorsement

Project Name/Number: /AIC-08-Trigger-01

Filing Fees

Fee Required? Yes
Fee Amount: \$50.00
Retaliatory? No

Fee Explanation: \$50.00 Per form filing-flat fee.

Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
American Home Assurance Company	\$50.00	12/11/2008	24481679
AIU Insurance Company	\$0.00	12/11/2008	
American International South Insurance	\$0.00	12/11/2008	
Company			
AIG Casualty Company	\$0.00	12/11/2008	
Commerce and Industry Insurance Company	\$0.00	12/11/2008	
Granite State Insurance Company	\$0.00	12/11/2008	
Illinois National Insurance Co.	\$0.00	12/11/2008	
National Union Fire Insurance Company of	\$0.00	12/11/2008	
Pittsburgh, Pa.			
New Hampshire Insurance Company	\$0.00	12/11/2008	
The Insurance Company of the State of	\$0.00	12/11/2008	
Pennsylvania			

Company Tracking Number: AIC-08-TRIGGER-01

TOI: 35.001 Interline Filings Sub-TOI: 35.0002 Commercial Interline Filings

Product Name: Credit Trigger Endorsement

Project Name/Number: /AIC-08-Trigger-01

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Llyweyia Rawlins	12/11/2008	12/11/2008

Company Tracking Number: AIC-08-TRIGGER-01

TOI: 35.0 Interline Filings Sub-TOI: 35.0002 Commercial Interline Filings

Product Name: Credit Trigger Endorsement

Project Name/Number: /AIC-08-Trigger-01

Disposition

Disposition Date: 12/11/2008

Effective Date (New): 12/11/2008 Effective Date (Renewal): 12/11/2008

Status: Approved

Comment:

Rate data does NOT apply to filing.

Overall Rate Information for Multiple Company Filings

Overall Percentage Rate Indicated For This Filing 0.000%

Overall Percentage Rate Impact For This Filing 0.000%

Effect of Rate Filing-Written Premium Change For This Program \$0

Effect of Rate Filing - Number of Policyholders Affected 0

Company Tracking Number: AIC-08-TRIGGER-01

TOI: 35.0 Interline Filings Sub-TOI: 35.0002 Commercial Interline Filings

Product Name: Credit Trigger Endorsement

Project Name/Number: /AIC-08-Trigger-01

Item Type Item Name Item Status Public Access Uniform Transmittal Document-Property & Approved Yes **Supporting Document** Casualty Credit Rating Downgrade Endorsement Yes Approved **Form** Credit Rating Downgrade Endorsement Approved Yes **Form** Subject to the Policy Minimum Earned

Premium

Company Tracking Number: AIC-08-TRIGGER-01

TOI: 35.0 Interline Filings Sub-TOI: 35.0002 Commercial Interline Filings

Product Name: Credit Trigger Endorsement

Project Name/Number: /AIC-08-Trigger-01

Form Schedule

Review	Form Name	Form #	Edition	Form Type Action	Action Specific	Readability	Attachment
Status			Date		Data		
Approved	Credit Rating	100685	(11-08)	Endorseme New		0.00	100685 (11-
	Downgrade			nt/Amendm			08) Credit
	Endorsement			ent/Conditi			Rating
				ons			Downgrade
							Endorsemen
							t.pdf
Approved	Credit Rating	100686	(11-08)	Endorseme New		0.00	100686 (11-
	Downgrade			nt/Amendm			08) Credit
	Endorsement			ent/Conditi			Rating
	Subject to the			ons			Downgrade
	Policy Minimum						Endt Subject
	Earned Premium						to the Policy
							Minimum
							Earned
							Prem.pdf

This endorsement, effective at 12:01 AM	forms a part of			
Policy number				
Issued to:				
By:				
Credit Rating Downgrade Endorseme	ent			
This policy is amended as follows:				
In the event the financial strength rating of the Company is downgraded after the issuance of the policy to below A- by A.M. Best Co., or below BBB by Standard & Poor's Ratings Services (the " Credit Rating Downgrade "), this policy may be canceled by the First Named Insured referenced in the Declarations by mailing written prior notice to the Company or by surrender of this policy to the Company or its authorized agent or broker.				
If this policy is canceled by the First Named Insured Credit Rating Downgrade , then the Company shall re proportion of the premium as of the effective date of the minimum earned premium requirement, if any.	eturn the unearned pro rata			
For the purposes of this endorsement, the following definitions	s shall apply:			
1. Company means the insurer as shown on the Decla	rations page of this policy.			
 First Named Insured means the first Named Insured Corporation, Named Organization, Named Sponsor Declarations page of this policy. 	•			
To the extent that the provisions of this endorsement conflict this policy and/or (b) endorsements to this policy, the provision apply.				
All other terms, conditions, definitions, and exclusions of this	policy remain unchanged.			

Authorized Representative or Countersignature (where required)

This endorsement, effective at 12:01 AM	forms a part of		
Policy number			
Issued to:			
Bv:			

Credit Rating Downgrade Endorsement Subject to the Policy Minimum Earned Premium

This policy is amended as follows:

In the event the financial strength rating of the **Company** is downgraded after the issuance of the policy to below A- by A.M. Best Co., or below BBB by Standard & Poor's Ratings Services (the "**Credit Rating Downgrade**"), this policy may be canceled by the **First Named Insured** referenced in the Declarations by mailing written prior notice to the **Company** or by surrender of this policy to the **Company** or its authorized agent or broker.

If this policy is canceled by the **First Named Insured** within 30 days after such **Credit Rating Downgrade**, then the **Company** shall return the unearned pro rata proportion of the premium as of the effective date of cancellation, subject to the minimum earned premium requirement, if any.

For the purposes of this endorsement, the following definitions shall apply:

- 1. Company means the insurer as shown on the Declarations page of this policy.
- 2. **First Named Insured** means the first Named Insured, Named Entity, Named Corporation, Named Organization, Named Sponsor or Insured as shown on the Declarations page of this policy.

To the extent that the provisions of this endorsement conflict with any provisions of (a) this policy and/or (b) endorsements to this policy, the provisions of this endorsement shall apply.

All other terms, conditions, definitions, and exclusions of this policy remain unchanged.

Authorized Representative or	
Countersignature (where required)	

Company Tracking Number: AIC-08-TRIGGER-01

TOI: 35.0 Interline Filings Sub-TOI: 35.0002 Commercial Interline Filings

Product Name: Credit Trigger Endorsement

Project Name/Number: /AIC-08-Trigger-01

Rate Information

Rate data does NOT apply to filing.

Company Tracking Number: AIC-08-TRIGGER-01

TOI: 35.0 Interline Filings Sub-TOI: 35.0002 Commercial Interline Filings

Product Name: Credit Trigger Endorsement

Project Name/Number: /AIC-08-Trigger-01

Supporting Document Schedules

Review Status:

Satisfied -Name: Uniform Transmittal Document- Approved 12/11/2008

Property & Casualty

Comments:

Attachment:

P&C Transmittal Document.pdf

Property & Casualty Transmittal Document

1.	Reserved for Insurance	2. Insu	rance De	partment	Use only			
* *	Dept. Use Only a. Date			the filing is received:				
	■	b. Analy						
		c. Dispo					-	
		_ ·		ition of the	filing:	_		
					- IIIII 19.			
		е. Епес	tive date			····		
				l Business				
		f. State	Filing #:	, Baointooc	<u></u>			
			FF Filing	# ·				
	•	L						
		_ n. Subje	ect Codes	<u> </u>				
3.	Group Name							Group NAIC #
<u> </u>								
4.	Company Name(s)				Domicile	NAIC	#	FEIN#
4.	AIG Casualty Company				NY	012-1	9402	25-1118791
	AIU Insurance Company				NY	012-1		13-5303710
	American Home Assurance Co				NY	012-1		13-5124990
	American International South				PA	012-4		02-6008643 13-1938623
1	Commerce and Industry Insura		any		NY	012-19410		02-0140690
	Granite State Insurance Comp National Union Fire Insurance		of Dittobu	rah Do	PA	012-2		25-0687550
]	New Hampshire Insurance Co		oi Pillsbui	уп, га.	PA			02-0172170
ļ	The Insurance Company of the		Pennsylva	nia	PA	012-23841		13-5540698
5.	Company Tracking Number		AIC-	08-AV-05/	/06		. " -	
Cor	ntact Info of Filer(s) or Corporate		*	oll-free num				
6.	Name and address	Title		phone #s				e-mail
		Director	, ,) 458-	(212)458	-7077	ronal	d.colaninno@aig.
-	Ronald A. Colaninno 175 Water Street, 17 th Floor		7462	<u> </u>			COIII	
	New York, NY 10038							
7.		***	7	11 0	,			
		ad filar	Ronald A. Colaninno					
8.	Please print name of authorize							
	ing information (see General I	nstructions			inese fields)			-
10.	9. Type of Insurance (TOI)			35.0 Interline 35.0002 Commercial Interline Filings				
	Sub-Type of Incurance (Sul	h-TOI)	35 0002	Commerc	rial Interline	Filings		
11			35.0002	Commerc	cial Interline	Filings		
11.	State Specific Product code applicable)[See State Specific Rec	e(S)(if quirements]						
12.	State Specific Product code applicable)[See State Specific Rec Company Program Title (Mar	e(S)(if quirements]	Gold Me	dallion Cor	nprehensive	Busine		craft Program
	State Specific Product code applicable)[See State Specific Rec Company Program Title (Mar	e(S)(if quirements]	Gold Me	dallion Cor /Loss Cos	mprehensive	Busine	ates/F	Rules
12.	State Specific Product code applicable)[See State Specific Rec Company Program Title (Mar	e(S)(if quirements]	Gold Me	dallion Cor /Loss Cos ns [] Co	mprehensive t [] Rule mbination F	Busines [] F	ates/f ules/F	Rules forms
12.	State Specific Product code applicable)[See State Specific Rec Company Program Title (Mar	e(S)(if quirements]	Gold Me	dallion Cor /Loss Cos ns [] Co	mprehensive	Busines [] F	ates/f ules/F	Rules forms
12.	State Specific Product code applicable)[See State Specific Red Company Program Title (Mar Filing Type	(s)(if quirements] rketing title)	Gold Me [] Rate, [X] Forr [] With	dallion Cor /Loss Cos ns [] Co	mprehensive t [] Rule mbination F Other (giv	Busines [] F	ates/f ules/F ription	Rules forms
12. 13.	State Specific Product code applicable)[See State Specific Red Company Program Title (Mar Filing Type Effective Date(s) Requested	(s)(if quirements] rketing title)	Gold Me [] Rate, [X] Forr [] With	dallion Cor /Loss Cos ms [] Co ndrawal[]	mprehensive t [] Rule mbination F Other (giv	Busines [] Fates/R	ates/f ules/F ription	Rules forms)
12. 13. 14. 15. 16.	State Specific Product code applicable)[See State Specific Red Company Program Title (Mail Filing Type Effective Date(s) Requested Reference Filing? Reference Organization (if a	e(s)(if quirements] rketing title)	Gold Me [] Rate, [X] Forr [] With New: [] Yes N/A	dallion Cor /Loss Cos ns [] Co drawal[]	mprehensive t [] Rule mbination F Other (giv	Busines [] Fates/R	ates/f ules/F ription	Rules forms)
12. 13. 14. 15. 16. 17.	State Specific Product code applicable)[See State Specific Red Company Program Title (Mar Filing Type Effective Date(s) Requested Reference Filing? Reference Organization (if a	e(s)(if quirements] rketing title)	Gold Me [] Rate, [X] Forr [] With New:	dallion Cor /Loss Cos ns [] Co idrawal[] January 12 [X] No	mprehensive t [] Rule mbination F Other (giv 2, 2008 R	Busines [] Fates/R	ates/f ules/F ription	Rules forms)
12. 13. 14. 15. 16.	State Specific Product code applicable)[See State Specific Red Company Program Title (Mar Filing Type Effective Date(s) Requested Reference Filing? Reference Organization (if a Reference Organization # & Company's Date of Filing	e(s)(if quirements] rketing title)	Gold Me [] Rate, [X] Forr [] With New:	dallion Cor /Loss Cos ns [] Co drawal[]	mprehensive t [] Rules mbination F Other (giv 2, 2008 R	Busines [] Fates/R	Rates/Fules/Fription	Rules forms)

PC TD-1 pg 1 of 2

Property & Casualty Transmittal Document—

20. This filing transmittal is part of Company Tracking # AIC-08-Trigger-01

21. Filing Description [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]

The above-referenced companies (the "Companies") submit the attached Credit Rating Downgrade Endorsements. The substance of these endorsements was created collaboratively with our brokers and insureds. Understandably, our brokers and clients are extremely concerned about the recent developments of the Companies' parent, American International Group, Inc. The creation and use of these endorsements is an attempt to allay such concerns. Upon the request of the insured, the appropriate endorsement will be issued, at no charge to the insured. The endorsements will be available for use for all lines of business except workers' compensation.

22. Filing Fees (Filer must provide check # and fee amount if applicable)
[If a state requires you to show how you calculated your filing fees, place that calculation below]

Check #: EFT Amount: \$50.00

Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.

***Refer to the each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)

PC TD-1 pg 2 of 2

FORM FILING SCHEDULE

(This form must be provided ONLY when making a filing that includes forms) (Do <u>not</u> refer to the body of the filing for the forms listing, unless allowed by state.)

1.	This filing transmittal	is part of Company Tra	acking #	AIC-08-Tr	igger-01	
2.	2. This filing corresponds to rate/rule filing number (Company tracking number of rate/rule filing, if applicable)			N/A		
3.	Form Name /Description/Synopsis	Form # Include edition date	Replace Or withdra		If replacement, give form # it replaces	Previous state filing number, if required by state
01	Credit Rating Downgrade Endorsement	100685 (11/08)	[X] New [] Replacement [] Withdrawn			
02	Credit Rating Downgrade Endorsement subject to the Policy Minimum Earned Premium	100686 (11/08)	[X] New [] Replacement [] Withdrawn			

PC FFS-1

© 2007 National Association of Insurance Commissioners